

City of Williamsburg <i>Department of Public Works and Utilities</i> <i>Environmental Management System</i>	Form: EOP 4.4.62-3FB
	Form Date: 7/6/04
	Revision No. Revision Date:
Environmental Activities Statement	

This environmental activities statement must be completed, signed, returned to the City of Williamsburg EMS Team before the contracted work commences, or in a reasonable and agreed upon time frame.

*The following information is to be filled out by a company representative for the contracted work or service to be performed.
Please Print*

Contact person	_____	Date	_____
Company Name	_____		

Activities or Work Description:

Briefly describe the activities or work to be undertaken by your company at the Department of Public Works and Utilities Shop Complex.

Air Emissions:

Will the activities or work you perform produce or cause the release of any air emissions?	YES or NO
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If YES, list air emissions and method for preventing impact to the environment.

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Water Discharges:

Will the activities or work you perform produce or cause the release of any wastewater? YES or NO

If YES, how is wastewater handled?

Materials:

What materials (chemicals, oils, etc.) and / or equipment will you be handling or bringing on-site to perform the contracted work?

Training:

Your employees should be trained on the proper handling of materials and equipment, and the proper response to incidents involving these materials. Describe the training your employees receive.

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Waste Generation:

Will the activities or work you perform result in the generation of any wastes? YES or NO
If YES, list the amounts, types of wastes expected and the proposed disposal method.

Are any wastes generated to be recycled? YES or NO
If YES, list the recyclables, where and how they will be recycled.

Energy:

Will the activities or work you perform consume energy? YES or NO
(electricity, compressed air, natural gas, steam, etc.)

If YES, explain what type of energy will be consumed, and how you will minimize consumption.

Environmental Activities Statement

Other:

Are there any other ways in which your activities or work will affect and / or protect the environment? YES or NO

If YES, please describe below.

Information:

Company Name _____

Contacts
First Name _____ Last Name _____ Title _____

Address _____

City, State _____ Zip Code _____

Phone _____ Fax _____ e-mail
Address _____

Secondary
Contact _____ Secondary
Phone _____

Environmental Activities Statement

**Environmental
Agreement:**

*For questions or additional information regarding the use of this form, refer to the Contractor
Environmental Management Procedure or contact an EMS Team member (757) 220-6140*

I acknowledge receipt and concurrence with the Department of Public Works and Utilities Contractor Environmental Activities Briefing Package. My company and subcontractors that I may bring to the site will abide by all such environmental programs and policies whenever on the property. My company will train all personnel contracting on the property to the briefing package. Sign in sheets will be maintained as evidence that training has been conducted and will be made available to the Department of Public Works and Utilities upon request.

*Changes to the Environmental Management System will be communicated to my company by the EMS Team.
Retraining of affected individuals will be conducted, as appropriate.*

Print Name:

Title:

Signature:

Date:

To be completed by the EMS Team after a review is conducted.

A review of the above submitted document has found it to be:

☐ COMPLETE - approved, no further action is needed.

☐ NOT COMPLETE - a response must be received by:

Environmental Team Member Signature:

Date: